

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: 11/15/12 B.M.  
 PCB 1994-195  
 Maureen Hayes-Leyva  
 Village of Romeoville  
 615 Anderson  
 Romeoville, IL 60446

2. Article Number

(Transfer from service label)

7011 0110 0001 8270 2250

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *V. Metoyer*

Agent

Addressee

B. Received by (Printed Name)

V. Metoyer

C. Date of Delivery

11-19-12

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

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1. Article Addressed to: 11/15/12 B.M.

PCB 1994-195

Ray Meader

Tracy, Johnson & Wilson

2801 Black Road

Second Floor

Joliet, IL 60435

2. Article Number

(Transfer from service label)

7011 0110 0001 8270 2274

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*Schwalb*

Agent

Addressee

B. Received by (Printed Name)

*Schwalb*

C. Date of Delivery

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:  No

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes